

**TENNESSEE GENERAL ASSEMBLY  
FISCAL REVIEW COMMITTEE**



**FISCAL NOTE**

**SB 549 - HB 793**

March 2, 2009

**SUMMARY OF BILL:** Authorizes a health insurance company to deny a claim or recoup a payment for services within six months of the date of the claim from a provider only if a patient is discovered by the insurer to be covered under a policy from another health insurance entity at the time the services were provided. Extends the beginning of the timeframe in which a provider may submit a claim to the second health insurance entity to the date that the claim is originally denied or the date the original health insurance entity recoups payment.

**ESTIMATED FISCAL IMPACT:**

**Increase State Expenditures – Not Significant**

Assumptions:

- The Department of Commerce and Insurance is currently responsible for the administration and enforcement of retroactive denials and recoupment by insurance companies. Changes to the standards in which the recoupment may occur will not result in a significant increase in expenditures for the Department.
- Enforcement of the standards will be done as a result of complaints by providers that insurers are not complying with the requirements of the proposed legislation.
- Any cost can be accommodated within existing resources without an increased appropriation or reduced reversion.

**CERTIFICATION:**

This is to duly certify that the information contained herein is true and correct to the best of my knowledge.

A handwritten signature in black ink, reading "James W. White". The signature is written in a cursive style with a large, stylized initial "J".

James W. White, Executive Director

/kml